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## BIB DATA SHEET

CONFIRMATION NO. 3210

<b>SERIAL NUMBER</b> 10/827,572	<b>FILING or 371(c) DATE</b> 04/19/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> SE1-0034-US	
<b>APPLICANTS</b> Lowell L. Wood JR., Livermore, CA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/28/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /VICTORIA P CAMPBELL/ Acknowledged <u>Examiner's signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 65 <span style="border: 1px solid black; padding: 0 2px;">37</span>	<b>INDEPENDENT CLAIMS</b> 3 <span style="border: 1px solid black; padding: 0 2px;">1</span>
<b>ADDRESS</b> Constellation Law Group, PLLC P.O. Box 220 Tracyton, WA 98393 UNITED STATES					
<b>TITLE</b> System with a reservoir for perfusion management					
<b>FILING FEE RECEIVED</b> 1892	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		